

CLAIMS ONLY

Application Number

101006001

Applicant(s)

Filing Date

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7		/				
8		/				
9		/				
10		/				
11		/				
12		/				
13		/				
14		/				
15		/				
16		/				
17		/				
18		/				
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37		/				
38		/				
39		/				
40		/				
41		/				
42	/					
43		/				
44		/				
45		/				
46		/				
47	/					
48		/				
49		/				
50		/				
Total Indep	5					
Total Depend	45					
Total Claims	50					

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51	/					
52	/					
53	/					
54	/					
55	/					
56	/					
57	/					
58	/					
59	/					
60	/					
61	/					
62	/					
63	/					
64	/					
65	/					
66	/					
67	wave	wave				
68	/					
69	/					
70	wave	wave				
71	/					
72	/					
73	/					
74	/					
75	/					
76	/					
77	/					
78	/					
80	/					
81	/					
82	/					
83	/					
84	/					
85	/					
86	/					
87	/					
88	/					
89	/					
90	/					
91	/					
92						
93						
94						
95						
96						
97						
98						
99						
100						
Total Indep	7					
Total Depend	325					
Total Claims	39					

39
89